

Assignment Protest Form

To: _____ Title: _____ Date/Time: _____

From: _____ (RN/LPN _____) _____ (RN/LPN _____)

Unit: _____ Census: _____

Under the laws of the state of New Jersey, as a registered professional (RN)/ licensed practical nurse (LPN), I am responsible and accountable to my clients. Therefore, this is to confirm that I notified you that in my professional judgment, today's assignment is unsafe and places my clients at risk. I will continue to provide the best care possible in this situation, but I decline to accept any legal responsibility for any untoward events that may occur as a result of unsafe staffing by the hospital.

I will under protest, attempt to carry out the assignment to the best of my professional ability.

Signatures of Nurses Protesting

Unit Assignment: Nurses' Assignments

Name of Nurse	Assigned Patients /Issues
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Brief Summary: _____

_____ Continue_On_Back _____

Suggestions: _____

